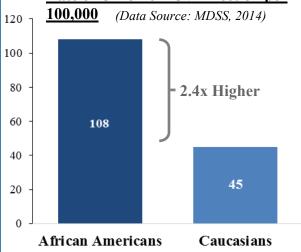
RACIAL DISPARITIES IN HEPATITIS C INFECTION AND HEALTH OUTCOMES



BACKGROUND

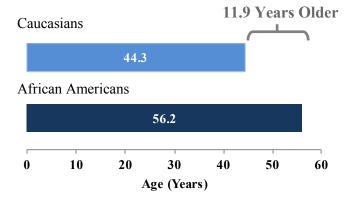
Hepatitis C Virus (HCV) is a blood-borne communicable disease that effects the liver and can lead to chronic infection, sometimes resulting in hepatocellular carcinoma and death. This report examines racial disparities in HCV infection rates reported through the Michigan Disease Surveillance System (MDSS) and HCV-related health outcomes (liver cancer and death rates) reported to MDHHS Vital Records.

Rate of Chronic HCV Infection per

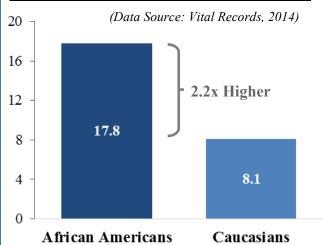


Disparity	African Americans	Caucasians
HCV Infection Rate	HIGHER	LOWER
Age at HCV Diagnosis	OLDER	YOUNGER
HCV Confirmatory Testing	LOWER	HIGHER
Liver Cancer Rate	HIGHER	LOWER
Liver Cancer Mortality Rate	HIGHER	LOWER

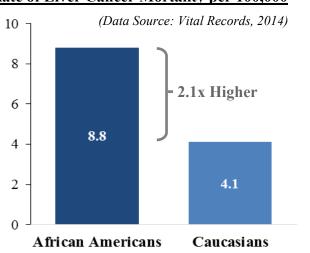
Age at HCV Diagnosis (Data Source: MDSS, 2014)



Rate of Liver Cancer Incidence per 100,000



Rate of Liver Cancer Mortality per 100,000



Take Home

The rate of liver cancer and liver cancer mortality are twice as high in African Americans compared to Caucasians

The disparity in these liver health outcomes may be the result of trends in Hepatitis C Virus infection



Compared to Caucasians, African Americans:

- Have a higher rate of HCV infection
- Are diagnosed at an older age (delayed treatment)
- Are receiving HCV RNA testing at a lower rate
- Are being evaluated for HCV treatment at a lower rate (genotype testing)

In 2014, the Michigan Behavioral Risk Factor Survey indicated that Whites (88.7%) were more likely to have healthcare coverage compared to Blacks (82.4%)

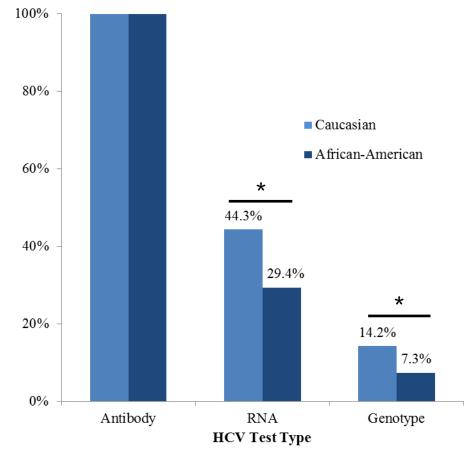
Reference: Michigan BRFS Annual Tables

Removing barriers to access to health insurance and health care may help reduce HCVrelated disparities

Earlier diagnosis, improved HCV testing, linkage to care, and treatment can greatly improve HCV-related health outcomes and reduce racial disparities

Racial Disparities in HCV Testing

A significantly lower proportion of African Americans receive HCV confirmatory testing and genotype testing (a marker the patient is being evaluated for treatment) compared to Caucasians. (Data Source: MDSS, 2014)



* Chi-square test: p < 0.001

Recommended Testing Sequence for Identifying Current Hepatitis C Virus (HCV) Infection Nonreactive Not Detected No HCV antibody detected No current HCV infection No Current HCV infection No HCV antibody detected No current HCV infection Link to care

Reference:

CDC Testing Algorithm for Identifying Current Hepatitis C Virus Infection

